1 LOCATI	ON OF WATE	R WELL:	Fraction		Section Number	Township	Number	Range Number	
County:	RUSSELL		SE1/4 SE1/	4 NE _{1/4}	11		12	12 W	
Distance and direction from nearest town or city street address of well if located within city? From Lucas, Ks & Miks South, 4 Miks West, 1/2 Miks North									
		(S	a a Miles	DOUTH,	7 Miles West	<u>, 12 1</u>	Miles 100	<u> </u>	
2 WATER WELL OWNER: ELMER Casper RR#, St. Address, Box #: 5301 198 H City, State, ZIP Code: Lucas, Ks 67648 Board of Agriculture, Division of Water Resources Application Number:									
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL									
AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVEL									
WELL WAS USED AS:									
N W N E Domestic 5 Public Water Supply 9 Dewatering								ıg	
w		Øo	3 Fee	igation dlot Justrial	6 Oil Field Water: 7 Lawn and Garden (8 Air Conditioning	Only 11	Injection		
	Was a chemical/bacteriological sample submitted to Department? YesNo								
Water Well Disinfected: Yes. X No									
S S S S S S S S S S S S S S S S S S S									
5 TYPE OF BLANK CASING USED:									
© Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile									
Blank casing diameter									
6 GROUT PLUG MATERIAL: 1 Neat cement ©Cement grout ©Bentonite 4 Other									
Grout Plug Intervals: From. 6ft. to4ft., From4ft. toft., From toft.									
What is the nearest source of possible contamination:									
OSeptic tank 6 Seepage pit 11 Fuel storage 16 Other (specify beloe) Sewer lines 7 Pit privy 12 Fertilizer storage							ecity below)		
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 6 Abandoned water well 5 Cess Pool 10 Livestock pens 15 Oil well/Gas well									
Direction from well? South How many feet? 30									
FROM TO PLUGGING MATERIALS									
	14								
30			inated Sa	na					
14	4	Clay							
6	1-1	Ceme	onite						
4	0	Ceme	ΛΤ						
				-					
		<u> </u>							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed									
on (mo/day/year)									
by (signature) Imm laspen water the business name of two Van Jahren, Karan huma business.									
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks,									
underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Owner and retain									
Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913/296-3565. Send one to Water Well Dwher and retain one for your records.									